Review Article

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Defamation in Dentistry: Legal Frameworks, Professional Risks and Preventive Strategies in the Digital Era

Ahmed A[1]*, Rahman T[2], Mannan H[3]

AUTHOR'S AFFILIATION

1. **Dr. Anam Ahmed**
   Associate Professor
   Dept. of Dental Public Health
   University Dental College
   Dhaka, Bangladesh.
   https://orcid.org/0000-0002-7051-3990
2. **Dr. Tasnova Rahman**
   Associate Professor
   Dept. of Dental Public Health
   Mandy Dental College
   Dhaka, Bangladesh.
   https://orcid.org/0009-0001-3826-6627
3. **Dr. Huda mannan**
   Associate Professor (C.C.)
   Dept. of Pedodontics
   University Dental College
   Dhaka, Bangladesh.
   https://orcid.org/0009-0002-0056-2081

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Corresponding Author*:

Dr. Anam Ahmed
Associate Professor
Dept. of Dental Public Health
University Dental College
Dhaka, Bangladesh.
Email: dph.udc@gmail.com
https://orcid.org/0000-0002-7051-3990

ABSTRACT

Background: Dentistry being a professional of trust is very much reliant on professional reputation. The phenomenon of social media, online opinions and internet communication has contributed enormously to increased exposure to defamation risks for dental practitioners, institutions and regulation bodies. Despite this increased concern, however, legal research specific to dentistry concerning defamation is still scarce.

Objective: This narrative review examines the legal concepts, professional risks, and preventive strategies with a suggestive framework related to defamation in dentistry, providing a comprehensive overview for dental practitioners and organizations.

Methods: A comprehensive search of PubMed and Google Scholar were conducted with the help of the keywords associated with the field of defamation and dentistry. Both the literature of the last 10 years and major legal and ethical sources were taken into consideration.

Key Findings: The review distinguishes the main legal aspects of defamation in dentistry, interprofessional communication and institutional processes, as the key sources of risk and patient-generated online content, as the key sources of actionable libel and slander. The permanence and reach of the online platform increase the reputational damage in the digital context. According to these results, a proposal is given to a suggestive legal protocol to regulate early detection, risk prevention and ethical response to defamation in the field of dentistry.

Conclusion: Legal awareness among dental professionals is essential in order to reduce the risk of defamation. A concerted effort by individual practitioners, professional organizations and regulatory bodies (with the assistance of specific guidelines in particular regions and interdisciplinary research) can effectively preserve professional reputation and public trust in dentistry.

Keywords: Defamation, dentistry, libel, slander, professional reputation, digital communication, legal framework, ethics, risk management.

INTRODUCTION

Dentistry, being a profession based on trust, it has a great deal to do with the professional reputation of its practitioners, a reputation which can be easily damaged by defamatory actions.[1] Maintaining a positive professional image is a fundamental requirement for developing patient confidence and ensuring the effective delivery of dental services. However, the modern environment poses growing challenges to such

reputation. The growth of social media, the growth of online review sites and the development of communication between healthcare professionals has resulted in a significant increase in the exposure of dental professionals to possible instances of defamation.[2]

The increased vulnerability of dental practitioners makes the need for a thorough understanding of defamation in the dental field. Defamation can come from many different sources, such as disgruntled patients, competitive colleagues or even miscommunication within institutional settings, which all have different implications. Therefore, assessing the medico-legal facets that include the ethical standards, consent, negligence and liabilities assists in ensuring proper implementation and provision of efficient services.[1] This narrative review is an attempt to examine the legal concepts, professional risk and prevent strategies associated with defamation in dentistry. By doing this, it assists in explaining the applicability of defamation in regard to individual practitioners' local dental organizations as well as those in charge of developing a professional policy.

MATERIALS AND METHODS

A comprehensive search strategy was used to identify the relevant literature, mostly focusing on the past fifteen years, although without strict date limitations to account for basic legal concepts. Key databases for this search were PubMed and the search engine Google Scholar. Search words included a variety of keywords including "defamation", "dentistry", "libel", "slander", "professional reputation", and "dental malpractice vs. defamation", as well as combinations of terms. Inclusion criteria for the selection of articles focused on articles which discussed the legal aspects of defamation in a healthcare or more specifically a dental context. This included a range of different types of publication, such as studies, reviews, case reports, in-depth legal analyses, and established rules about ethics. Conversely, exclusion criteria excluded non-relevant disciplines that did not have connections to healthcare or dentistry, as well as opinion pieces that did not have any substantive legal or ethical analysis. The language of included articles was limited to English, and this was considered a possible limitation. Data extraction and summarization involved the process of sorting the identified literature into themes.

Concept and Definition of Defamation

Defamation has referred to the act of damaging the good reputation of someone. It is a legal term which is different from professional criticism, which even though potentially negative does not necessarily fulfil the strict requirements of defamation. In order for a statement to be considered defamatory there must be the following essential elements: First, there has to be a false statement of fact. Second, this false statement must be told to a third party. Third, the statement must cause harm to the individual the statement is made about. Finally, there must be no lawful justification to the statement.[3]

Understanding these legal intricacies are of paramount importance to dental practitioners, particularly in light of the observed ethical standards in the dental profession being in a state of decline with the values superseded sometimes by the market.[1] This shift places more emphasis on the importance of a clear legal framework to address the issue of professional conduct. Within the context of healthcare and dentistry, defamation assumes a certain relevance, as it can have a significant impact on patient trust and professional status of practitioners.[4] The special problems of the highly regulated and trust-dependent nature of the medical and dental professions require a thorough understanding of that which is defamatory and how it can legally be distinguished from legitimate concerns or criticisms about the performance of the profession.

Types of Defamation Relevant to Dentistry

As a general term in law, defamation is usually divided into two broad classes of defamation libel and slander; both of which have important relevance to dental practitioners. Understanding these differences is important given the different legal implications as well as the different ways in which defamatory statements might occur in a professional dental context.

Libel

Libel means defamatory statements which are published or communicated in a permanent form (i.e. written words, images, broadcasts). In the dental field, it is most common on online platforms, such as social media, blogs, and patient review websites where libel can be spread far and wide.[2] Institutional communications and official reports are also possible sources of libel, if there are factual inaccuracies which damage the reputation of a professional. The long-lasting effects of libelous content, particularly on the internet, may result in long-term damage to a dentist's professional reputation and trust of the public.[5]

Slander

In contrast slander is spoken defamatory statements. While perhaps less permanent than libel, slander can still cause considerable damage in the close-knit communities of dentistry, both in the community of professionals and patients. This can occur in a number of different contexts such as during clinical discussions, academic discussions, statements published in the press or even informal professional discussions with colleagues.[6] For example, the negative things that are said about a colleague's competence with no basis, and may be done during an academic conference or casual verbal communication, could be a case of slander. These two types of defamation drive the point that dental professionals should be cautious in their self-discussions and watchful to false allegations put against them.

Common Sources of Defamation in Dental Practice

Defamation in the dental practice can arise from a number of different sources and all these can be problematic to a

practitioner's reputation and professional standing. Patient-initiated defamation is a common issue, which commonly takes the form of negative online reviews and allegations on social media. These digital platforms can quickly unverified claims which makes it hard for dentists to effectively manage their online presence, especially when patients misinterpret the results of a treatment, or express their dissatisfaction publicly.[5]

Another important area of defamation may come from within the profession itself, namely, dentist-to-dentist interaction. Professional competition or unethical criticism about colleagues can result in slanderous or libelous comments that destroy trust and damage professional relationships. Such instances may occur in informal conversations or in more formal settings, making for a hostile environment and which may affect career progression. These forms of communication form part of a wider issue in healthcare in which bullying and harassment is endemic, and have been seen in studies on medical workforces.[6]

Apart from personal communication, institutional and academic setting as another source of defamatory statements. Peer review comments or disciplinary proceedings, although aimed at maintaining professional standards, may sometimes involve or be given weight to statements which are perceived to be defamatory if not handled in an impartial and factual manner.[7] Furthermore, wider media and public communication, such as reports or discussions, can contribute unknowingly or intentionally to the defamation of dental professionals or institutions, thus there is a need for vigilance in multiple channels of communication, in order to protect the integrity of the profession.

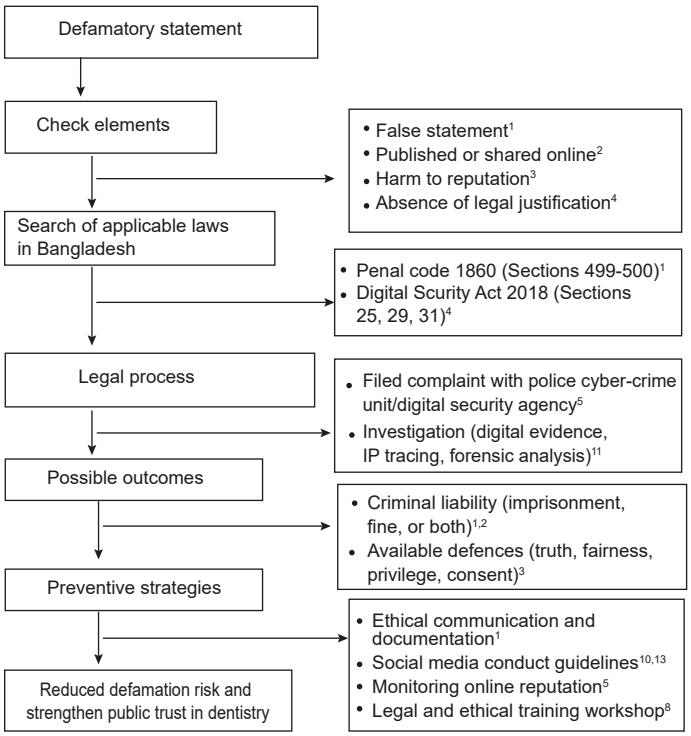
Ethical and Professional Implications

Defamation is a major ethical and professional dilemma to dental practitioners. The practice of dentistry is constructed on the basis of trust, and any defamation may seriously hamper the professional image of a dentist, which is pivotal in creating trust among patients and is a guarantee of a successful service provision.[9] It is not only an issue of professional status, but has a direct manipulative effect on the psychological health of dental professionals. Research indicates that healthcare workforces (including senior medical and dental specialists) are highly prone to harassment and bullying due to the psychological burden of adverse interactions can impose.[6] This brings the necessity of maintaining ethical behaviour and putting up of robust support systems to manage such harms.

Defamation in the Digital Era

Reputation management in dentistry has changed due to social media and internet culture, posing new difficulties. Dentists must carefully manage their online presence to preserve patient trust and professional credibility due to the quick dissemination of information, whether it be true or false. When dealing with libelous content, ethical, deliberate answers are crucial because impulsive responses could exacerbate reputational loss and validate false claims.[10] These concerns are increased by the internet's worldwide reach and anonymity, making regulation challenging.[3] As a result, dentists need to receive training on online behavior, digital patient-provider interactions, and privacy protection. Patient data must be managed securely to avoid breaches that could have negative effects on one's reputation or legal ramifications.[11]

Suggestive legal framework for identification, assessment, and prevention of defamation in dental practice.



Gaps in Literature and Future Directions

Although the issue of defamation is becoming increasingly relevant to the field of dentistry, much of the existing legal research on dental issues is evidently deficient in focusing specifically on the subject, which is why a major gap in the literature is observed.[14] Although there are general principles of defamation, the specifics of profession and ethics that are peculiar to dentistry tend to introduce complexities that are not entirely factored into the laws of defamation as identified in general legal circles. Therefore, more specific research is urgently required to investigate the occurrences of defamation in dental practice.

The next round of research must focus on the creation of region-specific guidelines because legal frameworks and cultural landscapes may have a significant impact on the interpretation and management of defamation in the dental

industry.[8] This is further complicated by the fact that digital communication is global and that the effects of such defamatory statements sovereign to a particular jurisdiction may have consequences in other jurisdictions. This local attention is necessary to give practitioners and institutions useful and practical tips.

To close the existing knowledge gaps successfully the interdisciplinary research that will combine both legal and dental views is essential. This type of collaboration may result in the holistic approaches to the prevention and management of defamation in the dental profession and provide a more holistic perspective on the issue and its resolution.[15] Such a strategy would enhance deeper discussion between jurists and the dental professionals, and ultimately safeguard the professional images and secure the ethical practice in a highly litigious and digitally interconnected world.

CONCLUSION

Dental professionals must be legally educated in order to preserve their reputation in both traditional and digital contexts and to differentiate between criticism and defamation. Practitioners should foresee dangers by having a thorough understanding of libel, slander, and frequent sources of defamation. Along with continuing legal and ethical education, preventive measures include proper documentation, managing ethical complaints, and following social media norms should be given top priority. Building a legally informed environment of care requires cooperation between individual dentists, professional associations, and regulatory entities. The dental profession may provide high-quality patient treatment while upholding ethical standards and fostering public trust by filling up gaps in dental-specific legal research and creating region-specific guidelines.

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REFERENCES

1. Bhadauria US, Dasar PL, N. S, Mishra P, Godha S. Medico-legal Aspect of Dental Practice. Medicine and Pharmacy Reports [Internet]. 2018 Jun 24;91(3):255–8. Available from: http://doi.org/10.15386/cjmed-764
2. Farsi D, Martinez-Menchaca HR, Ahmed M, Farsi N. Social Media and Health Care (Part II): Narrative Review of Social Media Use by Patients (Preprint). 2021 May 14; Available from: http://doi.org/10.2196/preprints.30379
3. Laidlaw E. Online Shaming and the Right to Privacy. SSRN Electronic Journal [Internet]. 2017; Available from: http://doi.org/10.2139/ssrn.2944307
4. Coulthard P, Thomson P, Dave M, Coulthard FP, Seoudi N, Hill M. The COVID-19 pandemic and dentistry: the clinical, legal and economic consequences - part 1: clinical. British Dental Journal [Internet]. 2020 Dec;229(11):743–7. Available from: http://doi.org/10.1038/s41415-020-2404-y
5. Rothenfluh F, Schulz PJ. Content, Quality, and Assessment Tools of Physician-Rating Websites in 12 Countries: Quantitative Analysis (Preprint). 2017 Oct 3; Available from: http://doi.org/10.2196/preprints.9105
6. Chambers CNL, Frampton CMA, McKee M, Barclay M. 'It feels like being trapped in an abusive relationship': bullying prevalence and consequences in the New Zealand senior medical workforce: a cross-sectional study. BMJ Open [Internet]. 2018 Mar;8(3):e020158. Available from: http://doi.org/10.1136/bmjopen-2017-020158
7. Bloom BE, Sorin CR, Wagman JA, Oaks L. Employees, Advisees, and Emerging Scholars: A Qualitative Analysis of Graduate Students' Roles and Experiences of Sexual Violence and Sexual Harassment on College Campuses. Sexuality & Culture [Internet]. 2021 Mar 20;25(5):1653–72. Available from: http://doi.org/10.1007/s12119-021-09841-w
8. Nundy S, Kakar A, Bhutta ZA. How to Practice Academic Medicine and Publish from Developing Countries? A Practical Guide. 2022;C1–2. http://dx.doi.org/10.1007/978-981-16-5248-6_49.
9. Sridharan G, Jagadish P. Standard of care in dentistry. Journal of Orofacial Sciences [Internet]. 2012;4(2):100. Available from: http://doi.org/10.4103/0975-8844.106197
10. Kanchan S, Gaidhane A. Social media role and its impact on public health: a narrative review. Cureus. 2023 Jan 13; http://doi.org/10.7759/cureus.33737.
11. Mehrtak M, Seyed Alinaghi S, Mohsseni Pour M, Noori T, Karimi A, Shamsabadi A. Security challenges and solutions using healthcare cloud computing. J Med Life. 2021 Jul-Aug;14(4):448-61. doi: 10.25122/jml-2021-0100.
12. Cui HW, Reynard J. Urologists and social media: pitfalls and perils and what to think about before hitting 'send'. BJU Int. 2025 Mar;135(3):390-8. doi: 10.1111/bju.16636.
13. Pethani F. Promises and perils of artificial intelligence in dentistry. Austr Dent J. 2021 Jan 17;66(2):124–35. http://doi.org/10.1111/adj.12812.
14. Uygun ilikhan S, özer M, tanberkan h, bozkurt v. How to mitigate the risks of deployment of artificial intelligence in medicine? Turkish J Med Sc 2024 Jun 12;54(3):483–92. http://doi.org/10.55730/1300-0144.5814.

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